Fill in this information to identify your case:				
Debtor 1	Richard Eugene Ward			
Debtor 2 (Spouse, if filing)	Janelle Amelia Rogers			
United States Bankruptcy Court for the:District of Utah				
Case number (if known)				

Chec	Check as directed in lines 17 and 21:				
According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
-	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,398.82 6,934.22 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 2 of $14\square$

Case number (if known)

Richard Eugene Ward

Janelle Amelia Rogers

Debtor 1

Debtor 2

Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6,934.22 3.398.82 10,333.04 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 10.333.04 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 10.333.04 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 10,333.04 15a. Copy line 14 here=>

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 3 of 14 \square

Debtor 1 Debtor 2 Anelle Amelia Rogers		Case number (if known)	
	Multiply line 15a by 12 (the number of months in	a year).	x 12
1	5b. The result is your current monthly income for the	e year for this part of the form	\$ 123,996.48
16. Ca	Iculate the median family income that applies to y	/ou. Follow these steps:	
16	a. Fill in the state in which you live.	υт	
16	b. Fill in the number of people in your household.	5	
	c. Fill in the median family income for your state and To find a list of applicable median income amounts instructions for this form. This list may also be avai	s, go online using the link specified in the separate	\$ <u>120,965.00</u>
17. Ho	w do the lines compare?	, ,	
178		On the top of page 1 of this form, check box 1, <i>Dispo</i> tiOT fill out <i>Calculation of Your Disposable Income</i> (
171	•	of page 1 of this form, check box 2, <i>Disposable inco</i> ulation of Your Disposable Income (Official Form bove.	<u> </u>
Part 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)	
18. Co	py your total average monthly income from line 1	1.	\$ 10,333.04
cor spo 19a	duct the marital adjustment if it applies. If you are need that calculating the commitment period under 1 buse's income, copy the amount from line 13. a. If the marital adjustment does not apply, fill in 0 on both co. Subtract line 19a from line 18.	1 U.S.C. § 1325(b)(4) allows you to deduct part of y	
	Iculate your current monthly income for the year. a. Copy line 19b		¢ 10,333.04
200			Ψ
	Multiply by 12 (the number of months in a year).		x 12
201	o. The result is your current monthly income for the y	ear for this part of the form	\$ 123,996.48
200	c. Copy the median family income for your state and	size of household from line 16c	\$120,965.00_
21.	How do the lines compare?		
	Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the court, on the top of page 1 of this	form, check box 3, The commitment
	Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	lless otherwise ordered by the court, on the top of pa	age 1 of this form, check box 4, The
Part 4:	Sign Below		
Ву	signing here, under penalty of perjury I declare that t	he information on this statement and in any attachm	nents is true and correct.
X /s	s/ Richard Eugene Ward	X /s/ Janelle Amelia Rogers	;
R	ichard Eugene Ward	Janelle Amelia Rogers	
	ignature of Debtor 1 te July 20, 2023	Signature of Debtor 2 Date July 20, 2023	
υa	MM / DD / YYYY	MM / DD / YYYY	
If y	ou checked 17a, do NOT fill out or file Form 122C-2.		

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 4 of 14 \square

Debtor 1	Richard Eugene ward		
Debtor 2	Janelle Amelia Rogers	Case number (if known)	

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

						-			
Fill i	n this info	ormation to ide	ntify your case:						
Debt	tor 1	Richard Eug	gene Ward						
Debt	tor 2 buse, if filin	Janelle Ame	elia Rogers						
Unite	ed States I	Bankruptcy Cour	t for the: District o	f Utah					
	e number nown)						☐ Check if t	his is an amende	ed filing
	ial Form 1 apter		ılation of Y	our Dispo	sable Ir	ncome			04/2
		form, you will r Period (Official I	need your complete Form 122C-1).	ed copy of <i>Chapte</i>	er 13 Stateme	ent of Your Curre	ent Monthly Inc	ome and Calculat	tion of
spac	e is neede	ed, attach a sep	as possible. If two arate sheet to this ame and case num	form, Include the					
Part	1: Ca	lculate Your De	eductions from You	ır Income					
th	e questio	ns in lines 6-15	ice (IRS) issues Na . To find the IRS st vailable at the bank	andards, go onlin	ne using the I				
ex	penses if	they are higher t	s set out in lines 6-1 than the standards. I any amounts that yo	Do not include any	operating exp	enses that you s	ubtracted from i	ncome in lines 5 ar	
lf	your expe	nses differ from	month to month, ent	er the average exp	oense.				
N	ote: Line n	umbers 1-4 are	not used in this form	. These numbers a	apply to inforn	nation required by	a similar form u	used in chapter 7 c	ases.
5.	The nu	ımber of people	e used in determini	ng your deductio	ns from inco	me			
	plus the	e number of any	ople who could be c additional depender n your household.					5	
N	ational St	andards	You must use the	IRS National Stan	ndards to ansv	ver the questions	in lines 6-7.		
6.			ther items: Using th llar amount for food,			I in line 5 and the	IRS National	\$	2,349.00
7.	the doll people	lar amount for or who are 65 or o	care allowance: Us ut-of-pocket health c lderbecause older nount, you may dedu	are. The number of people have a high	of people is sp her IRS allowa	lit into two catego ance for health ca	riespeople who	o are under 65 and	d

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 6 of $14\square$

Richard Eugene Ward Debtor 1 Janelle Amelia Rogers Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 395.00 Copy here=> \$ 395.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 154 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 395.00 395.00 7g. **Total.** Add line 7c and line 7f Copy total here=> Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 790.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,750.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment LoanCare LLC 2,011.00 Сору Repeat this amount 2.011.00 2,011.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Сору 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Case 23-23078 Doc 6 Page 7 of 14□ Document

Debtor 1 Debtor 2	Richard Eugene Ward Janelle Amelia Rogers			Case number (i	f known)		
11.	Local transportation expens	es: Check the number of vehic	cles for which you claim	n an ownership	o or operating	expense.	
	☐ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	Vehicle operation expense: operating expenses, fill in the						528.00
13.	Vehicle ownership or lease of You may not claim the expensions more than two vehicles.						
Vel	hicle 1 Describe Vehicle 1	 2013 Nissan Sentra Log George UT 84790 purch making all payments of as he uses it for work, 	hased for minor so n this car and will o	n. He has be	een		
13a.	Ownership or leasing costs us	ing IRS Local Standard		\$	629.00		
13b.	Average monthly payment for Do not include costs for leased	,					
	To calculate the average montare contractually due to each sbankruptcy. Then divide by 60	secured creditor in the 60 mont		at			
	Name of each creditor f	or Vehicle 1	Average monthly payment				
	Westlake Portfolio M	anagement, LLC	\$ 105.39				
	Tota	Average Monthly Payment	\$ 105.39	Copy here => -	\$105	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lea Subtract line 13b from line 13a	•	, enter \$0	\$	523.61	Copy net Vehicle 1 expense here => \$	523.61
Vel	hicle 2 Describe Vehicle 2	:				J	
13d.	Ownership or leasing costs us	ing IRS Local Standard		\$	0.00		
13e.	Average monthly payment for leased vehicles.	all debts secured by Vehicle 2.	Do not include costs for	or			
	Name of each creditor f	or Vehicle 2	Average monthly payment				
	-NONE-		\$				
	Tota	average monthly payment	\$0.00	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lea Subtract line 13e from line 13c	•	, enter \$0	 \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expension Public Transportation expension					the \$	0.00
15.	Additional public transporta also deduct a public transporta not claim more than the IRS Lo	ation expense, you may fill in w	hat you believe is the a				0.00

Richard Eugene Ward

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 8 of 14 \square

Debtor 1 Debtor 2 Richard Eugene Ward
Janelle Amelia Rogers

Case number (if known)

		addition to the expense de following IRS categories.		pove, you are allowed your monthly expense	es for	
16.	self-employment taxes, social s	ecurity taxes, and Medica ver, if you expect to receive the total monthly amount to	are taxes. You ma	e and local taxes, such as income taxes, y include the monthly amount withheld from ou must divide the expected refund by 12 pay for taxes.	\$	1,577.91
17.	Involuntary deductions: The contributions, union dues, and	uniform costs.		•		0.00
	Do not include amounts that are	e not required by your job,	, such as voluntai	y 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payment	s that you make for your se insurance on your deper	spouse's term life	m life insurance. If two married people are insurance. filing spouse's life insurance, or for any form	\$_	0.12
19.	Court-ordered payments: The administrative agency, such as Do not include payments on pa	spousal or child support p	payments.	uired by the order of a court or ort. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly a			· ·	_	
0.	as a condition for your job, of	, , ,				
	_		child if no public	education is available for similar services.	\$	0.00
21		, , ,	·	abysitting, daycare, nursery, and preschool.	_	
۷۱.	Do not include payments for an				\$	0.00
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					
	expenses, such as those repor	ted on line 5 of Official For	rm 122C-1, or an	y amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allow Add lines 6 through 23.			y amount you previously deducted.	**_ \$	6,163.64
	Add all of the expenses allow	red under the IRS expen These are additional de	se allowances.		· —	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in	red under the IRS expen These are additional de Note: Do not include an	eductions allowed by expense alloward	by the Means Test.	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance,	These are additional de Note: Do not include an asurance, and health say and health say	eductions allowed by expense alloward	by the Means Test. nces listed in lines 6-24. kpenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$	
Add	Add all of the expenses allow Add lines 6 through 23. ditional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents.	These are additional de Note: Do not include an asurance, and health savand health savand health savand health savand health savand	ductions allowed by expense alloward vings account ex unts that are reason	by the Means Test. nces listed in lines 6-24. kpenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$	
Add	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance	These are additional de Note: Do not include an asurance, and health savand health savand health savand health savand health savand	eductions allowed by expense alloward are reasonable that are reasonable to the second	by the Means Test. nces listed in lines 6-24. spenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$	
Add	Add all of the expenses allow Add lines 6 through 23. ditional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance	These are additional de Note: Do not include an asurance, and health savand health hea	eductions allowed by expense alloward are reasonable that are reasonable to the second	by the Means Test. nces listed in lines 6-24. cpenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$	
Add	Add all of the expenses allow Add lines 6 through 23. ditional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account	These are additional de Note: Do not include an asurance, and health savand health savings account +	eductions allowed by expense alloward wings account expense that are reasons \$ 177.25 \$ 49.75	by the Means Test. nces listed in lines 6-24. cpenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$or	6,163.64
Add	Add all of the expenses allow Add lines 6 through 23. ditional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota	These are additional de Note: Do not include an asurance, and health savand health savings account +	eductions allowed by expense alloward wings account expense that are reasons \$ 177.25 \$ 49.75	by the Means Test. nces listed in lines 6-24. cpenses. The monthly expenses for health onably necessary for yourself, your spouse,	\$or	6,163.64
Add 25.	Add all of the expenses allow Add lines 6 through 23. litional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota No. How much do you a Yes Continuing contributions to toontinue to pay for the reasonal	These are additional de Note: Do not include an asurance, and health savand health savand health savand health savings account amount? actually spend? he care of household or ble and necessary care an our immediate family who	ductions allowed by expense alloward vings account expense that are reasons \$ 177.25 \$ 49.75 \$ 96.00 \$ 323.00 \$ \$ created as the support of an expense of support of support of an expense of support of support of an expense of support of	by the Means Test. nces listed in lines 6-24. kpenses. The monthly expenses for health bright processory for yourself, your spouse, Copy total here=> Copy total here=> The actual monthly expenses that you will elderly, chronically ill, or disabled member of for such expenses. These expenses may	\$s	6,163.64
25. 26.	Add all of the expenses allow Add lines 6 through 23. Iitional Expense Deductions Health insurance, disability in insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tota No. How much do you a Yes Continuing contributions to the continue to pay for the reasonal your household or member of yinclude contributions to an according protection against family viole.	These are additional de Note: Do not include an asurance, and health savand health savand health savings account amount? actually spend? the care of household or ble and necessary care are our immediate family who bunt of a qualified ABLE prence. The reasonably necessary care.	ductions allowed by expense alloward vings account expense and support of an expense and support of an expense via support of an	by the Means Test. nces listed in lines 6-24. kpenses. The monthly expenses for health bright processory for yourself, your spouse, Copy total here=> Copy total here=> The actual monthly expenses that you will elderly, chronically ill, or disabled member of for such expenses. These expenses may	\$s	323.00

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 9 of 14 \square

Debtor 1 Debtor 2	Richard Eugene Ward Janelle Amelia Rogers	Case	e number (<i>if known</i>)			
	Additional home energy costs. Your hom- line 8.	e energy costs are included in your insurance	and operating expenses on			
	If you believe that you have home energy color, then fill in the excess amount of home en	osts that are more than the home energy cost ergy costs	s included in expenses on line	•		
	You must give your case trustee documents amount claimed is reasonable and necessar	ation of your actual expenses, and you must s ry.	show that the additional	\$_	0.00	
29.	Education expenses for dependent child \$189.58* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (not more than ars old to attend a private or			
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must e ot already accounted for in lines 6-23.	explain why the amount			
	* Subject to adjustment on 4/01/25, and ever	ry 3 years after that for cases begun on or aft	ter the date of adjustment.	\$_	0.00	
	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
		onal allowance, go online using the link speci o be available at the bankruptcy clerk's office				
	You must show that the additional amount of	laimed is reasonable and necessary.		\$_	0.00	
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	the form of cash or financial			
	Do not include any amount more than 15%	of your gross monthly income.		\$_	0.00	
32.	Add all of the additional expense deduct Add lines 25 through 31.	ions.		\$_	323.00	
Ded	uctions for Debt Payment					
I. T	oans, and other secured debt, fill in lines	ent, add all amounts that are contractually due			ge monthly	
33a.	Copy line 9b here		=>	payme \$	ent 2,011.00	
JJa.				Ψ	2,011.00	
33b.	Loans on your first two vehicles			\$	405.20	
				· -	105.39	
33c.	Copy line 13e here		=>	\$	0.00	
33d.	List other secured debts:					
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?			
		sofa	■ No			
	Blvd Home	Location: 3572 East Cove Wash Wa Saint George UT 84790	y,	\$	32.00	
			□ No			
			□ Yes	\$		
		-		Ψ		
			□ No			
			□ Yes .	- \$		
			Copy			
33e	Total average monthly payment. Add lines	33a through 33d	\$ 2,148.39 total here=	*	2,148.39	

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Mair Document Page 10 of 14□

Richard Eugene Ward Debtor 1 Janelle Amelia Rogers Case number (if known) Debtor 2 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount -NONE- $\div 60 = $$ Copy total 0.00 Total \$ 0.00 here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 294.64 17.678.53 ÷60 \$ 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> \$ 2,443.03 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,163.64 expense allowances Copy line 32, All of the additional expense deductions 323.00 Copy line 37, All of the deductions for debt payment +\$ 2,443.03 8.929.67 8,929.67 Total deductions..... Copy total here=>

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 11 of 14 \square

o lan	Richard Eugene Ward 2 Janelle Amelia Rogers Case number (if known)							
Janiene Ameria Rogers Case municer (ii known)								
2: De	termine You	r Disposable Income Under 11 U.S.C. § 132	25(b)(2)					
							\$	10,333.04
40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.						\$0	.00	
11. Fill in all qualified retirement deductions. The monthly total of all amounts that your						\$108	.33	
Total of	all deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 he	re =:	>	\$8,929	.67	
expense their exp	s and you ha enses. You n	ve no reasonable alternative, describe the spenust give your case trustee a detailed explana	ecial circumsta		d			
scribe th	e special cir	cumstances	Amount	of expe	ense	е		
			\$					
			\$					
			\$					
		Total	\$	0.00		• •	0.00	
Total ad	ljustments. <i>F</i>	add lines 40 through 43.		.=>	\$	9,038.00	Copy here=> -\$	9,038.00
Calcula	te your mont	hly disposable income under § 1325(b)(2).	Subtract line 4	4 from I	ine	39.	\$	1,295.04
B: Ch	ange in Inco	ome or Expenses						
have cha time you you filed	anged or are r case will be your petition	virtually certain to change after the date you for open, fill in the information below. For examp, check 122C-1 in the first column, enter line 2	iled your bankroole, if the wages in the second	uptcy pe reporte column	etitic ed ir , ex	on and during the ncreased after		
m	Line	Reason for change	Date of	change		Increase or decrease?	Amount of	change
122C-2 122C-1 122C-2 122C-1 122C-2						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease	\$ \$ \$	
	Calcular Total ad Calcular	Calculate your montal circumstances and do scribe the special circumstance or have changed or are time your case will be you filed your petition wages increased, fill in all calculate your montal circumstances and do scribe the special circumstan	Copy your total current monthly income from line 14 of Form of Statement of Your Current Monthly Income and Calculation of Fill in any reasonably necessary income you receive for support children. The monthly average of any child support payments, for a dependent child, reported in Part I of Form received in accordance with applicable nonbankruptcy law to the encessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all employer withheld from wages as contributions for qualified retiremin 11 U.S.C. § 541(b)(7) plus all required repayments of loans from specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Deduction for special circumstances. If special circumstances is expenses and you have no reasonable alternative, describe the spetheir expenses. You must give your case trustee a detailed explanacircumstances and documentation for the expenses. Scribe the special circumstances Change in Income or expenses. Change in Income or expenses. If the income in Form 122C-1 or have changed or are virtually certain to change after the date you time your case will be open, fill in the information below. For examp you filed your petition, check 122C-1 in the first column, enter line is wages increased, fill in when the increase occurred, and fill in the action in the line of the petition of the	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapte Statement of Your Current Monthly Income and Calculation of Commitment. Fill in any reasonably necessary income you receive for support for depende children. The monthly average of any child support payments, foster care paymer disability payments for a dependent child, reported in Part 1 of Form 122C-1, that y received in accordance with applicable nonbankruptcy law to the extent reasonabl necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that employer withheld from wages as contributions for qualified retirement plans, as sy in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plan specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 he Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstance irrustances are greated as a detailed explanation of the special circumstances and documentation for the expenses. Scribe the special circumstances Amount **Calculate your monthly disposable income under § 1325(b)(2). Subtract line 4 **Change in Income or expenses. If the income in Form 122C-1 or the expenses you filed your petition, check 122C-1 in the first column, enter line 2 in the second have changed or are virtually certain to change after the date you filed your bankritime your case will be open, fill in the information below. For example, if the wages you filed your petition, check 122C-1 in the first column, enter line 2 in the second wages increased, fill in when the increase occurred, and fill in the amount of the in me. **Line** Reason for change** **Line** Reason for change** **Line** Reason for change **Line** Line** Li	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, loster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 54(b)(7), Dept line 38 here podulated and plant and the special circumstances and you have no reasonable alternative, describe the special circumstances and for the expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. **Change in Income or expenses.** Change in Income or expenses.** If the income in Form 122C-1 or the expenses you represent the special circumstances and income or expenses.** If the income in Form 122C-1 or the expenses you represent you filed your petition, check 122C-1 in the first column, enter line 2 in the second column wages increased, fill in when the increase occurred, and fill in the amount of the increase. **Line**	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here payments and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Scribe the special circumstances Amount of expenses Change in income or expenses. If the income in Form 122C-1 or the expenses you reporte have changed or are virtually certain to change after the date you filed your bankruptcy petitit time your case will be open, fill in the information below. For example, if the wages reported it time your case will be open, fill in the information below. For example, if the wages reported it you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, ex wages increased, fill in when the increase occurred, and fill in the amount of the increase. Line Reason for change Line Reason for change Date of change	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, loster care payments, or disability payments for a dependent child, reported in Part of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 542(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \$\$ \$8,929. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. **Total** Total** adjustments. Add lines 40 through 43. **Solution** Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. **Change in Income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptop petition and during the your case trusted, fill in when the increase occurred, and fill in the amount of the increase of decrease? Increase of decreases (fill in when the increase occurred, and fill in the amount of the increase of locrease increase inc	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. \$ Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Commitment Period. Sistement of Your Current Monthly Income and Calculation of Period Income and Calculation Income of Calculation Income Information Delow. For example, if the wages reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your pening in the period Calculation Increase Increase of Increase Increase Increase Increase Increase Increase Increase Increase Increase Incre

Richard Eugene Ward

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 12 of 14 \square

Debtor 1 Debtor 2	Richard Eugene Ward Janelle Amelia Rogers		Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	nation	on this statement and in any attachments is true and correct.
-	/s/ Richard Eugene Ward Richard Eugene Ward Signature of Debtor 1	_	/s/ Janelle Amelia Rogers Janelle Amelia Rogers Signature of Debtor 2
	July 20, 2023 MM / DD / YYYY	_	July 20, 2023 MM / DD / YYYY

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 13 of 14□

Debtor 1 Debtor 2 Richard Eugene Ward Janelle Amelia Rogers

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2023 to 06/30/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Holbrook Asphalt

Income by Month:

6 Months Ago:	01/2023	\$6,584.48
5 Months Ago:	02/2023	\$6,584.48
4 Months Ago:	03/2023	\$6,584.48
3 Months Ago:	04/2023	\$6,584.48
2 Months Ago:	05/2023	\$6,584.48
Last Month:	06/2023	\$8,682.94
	Average per month:	\$6.934.22

Case 23-23078 Doc 6 Filed 07/20/23 Entered 07/20/23 17:38:53 Desc Main Document Page 14 of 14□

Debtor 1 Debtor 2 Richard Eugene Ward Janelle Amelia Rogers

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 01/01/2023 to 06/30/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Mytrex Management

Income by Month:

6 Months Ago:	01/2023	\$3,108.68
5 Months Ago:	02/2023	\$3,010.09
4 Months Ago:	03/2023	\$3,048.50
3 Months Ago:	04/2023	\$3,870.09
2 Months Ago:	05/2023	\$3,432.59
Last Month:	06/2023	\$3,922.97
	Average per month:	\$3,398.82